

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION
WELL COMPLETION OR RECOMPLETION REPORT AND LOG

Form C-105
Revised 1-1-65

5a. Indicate Type of Lease
State ☒ Fee ☐

5. State Oil & Gas Lease No.
L-5908

1a. TYPE OF WELL

b. TYPE OF COMPLETION

NEW WELL ☐

WORK OVER ☐

DEEPEN ☐

PLUG BACK ☐

DIFF. RESVR. ☐

OTHER ☐

OIL WELL ☐

GAS WELL ☐

CO₂ DRY ☒

OTHER ☐

2. Name of Operator

Amoco Production Company

3. Address of Operator

BOX 367, ANDREWS, TEXAS 79714

4. Location of Well

UNIT LETTER **B** LOCATED **1980** FEET FROM THE **EAST** LINE AND **660** FEET FROM

THE **NORTH** LINE OF SEC. **24** TWP. **17-N** RGE. **32-E** NMPM

15. Date Spudded

7-24-74

16. Date T.D. Reached

8-1-74

17. Date Compl. (Ready to Prod.)

—

18. Elevations (DF, RKB, RT, GR, etc.)

4762' RDB

19. Elev. Casinghead

—

20. Total Depth

2693

21. Plug Back T.D.

PXA

22. If Multiple Compl., How Many

—

23. Intervals Drilled By

—

Rotary Tools

O-TD

Cable Tools

—

24. Producing Interval(s), of this completion — Top, Bottom, Name

NONE

25. Was Directional Survey Made

—

26. Type Electric and Other Logs Run

GR-N

27. Was Well Cored

—

28. CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT LB./FT.	DEPTH SET	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
8 5/8	29.35	313	12 1/4	Circ	NONE

29. LINER RECORD

SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN

30. TUBING RECORD

SIZE	DEPTH SET	PACKER SET

31. Perforation Record (Interval, size and number)

NONE

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL AMOUNT AND KIND MATERIAL USED

33. PRODUCTION

Date First Production		Production Method (Flowing, gas lift, pumping — Size and type pump)				Well Status (Prod. or Shut-in)	
Date of Test	Hours Tested	Choke Size	Prod'n. For Test Period	Oil — Bbl.	Gas — MCF	Water — Bbl.	Gas — Oil Ratio
Flow Tubing Press.	Casing Pressure	Calculated 24-Hour Rate	Oil — Bbl.	Gas — MCF	Water — Bbl.	Oil Gravity — API (Corr.)	

34. Disposition of Gas (Sold, used for fuel, vented, etc.)

Test Witnessed By

35. List of Attachments

36. I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief.

SIGNED

Ray R. Yeakum

TITLE

ADMINISTRATIVE ASSISTANT

DATE

AUG 23 1974